

ASD(HA) Policies for Operation Iraqi Freedom Depleted Uranium (DU) Medical Management

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ASD(HA) Policies for Depleted Uranium (DU) Medical Management ERIOYMENT HEALTH CLINICAL CENTER OF THE PROPERTY HEALTH CLINIC

- ◆ 30 May 2003, OSD(HA) 03-012, Policy for OIF Depleted Uranium (DU) Medical Management
- ♠ 6 Feb 2004, OSD(HA) 04-004, DoD Deployment Biomonitoring Policy and Approved Bioassays for Depleted Uranium and Lead
- ◆ 9 Apr 2004, OSD(HA) Memorandum, OIF Depleted Uranium Medical Management
- http://www.ha.osd.mil/policies/default.cfm

ASD(HA) DU Policies Why Were the Policies Issued?



- DoD's commitment to ensuring the health concerns of our redeploying personnel are addressed
- Document DU exposure
- Identify appropriate DU-exposed service members for referral to VA DU Follow-up Program
- Long-term implications of DU exposure largely unknown
- Historical precedent (Operation Desert Shield/Desert Storm; OIF (UK))

ASD(HA) DU Policies What Is Required?



- ♣ Identification of all OIF service members, DoD civilians, and volunteers accompanying US Forces with potential DU exposure
 - Review of operational events (Friendly fire)
 - Post-Deployment Health Assessment (DD Form 2796)
- Qualitative assessment of level of exposure for service members and government civilians (refer others)
- DU bioassays for those with potential for significant exposure

ASD(HA) DU Policies What Is Required? (cont.)



- Offer referral to Baltimore VA Medical Center DU Follow-up Program for those with embedded DU fragments and others with documented significant exposures
- Personnel notified of their results
- Use of health risk communication practices throughout the process

Identification and Assessment Possible DU Exposure



- ♠ <u>Level I</u>: Personnel struck by DU munitions/fragments or who were in, on, or within 50 meters when an armored vehicle was struck
- ♠ Level II: Personnel who routinely enter DUdamaged vehicles or fight fires involving DU munitions as part of their military occupational specialty
- ♠ <u>Level III</u>: Personnel with "incidental" (insignificant DU exposures) -- infrequent exposure not expected to result in significant uptake of DU

Urine DU Bioassays



- Required for Levels I and II exposures; optional for Level III
 - 24-hour urine samples taken within 180 days (ideally) of exposure sent to approved lab IAW with Service guidance
 - Bioassays consist of testing urine, normalized for urine creatinine values, <u>for total uranium</u>, and for the <u>presence of DU</u> (isotopic analysis)
 - Submission of Depleted Uranium Questionnaire, and Health Survey (DD Forms 2872 and 2872-1 Test) with urine samples

Referral to VA



- Offer referral to the Baltimore VA's DU Followup Program for those with embedded fragments and others with elevated levels of DU
- Biennial comprehensive physical examinations and repeat DU bioassays (2 1/2 days)

Additional Requirements



- ◆ DoD Deployment Health Clinical Center (Walter Reed Medical Center)
 - Archival center for bioassay results and responsible for coordinating referrals and any long-term case management
- ◆ Service semi-annual reporting of DU Bioassay results to the Deployment Health Support Directorate (per 9 Apr 2004 memorandum to the Services)



Implementation of the ASD(HA) Depleted Uranium (DU) Policy Mary Vaeth, MD, MS, COL (USA Retired)

Mary Vaeth, MD, MS, COL (ŪSA Retired)
Dori Rogut, APRN, BC
Deployment Health Clinical Center

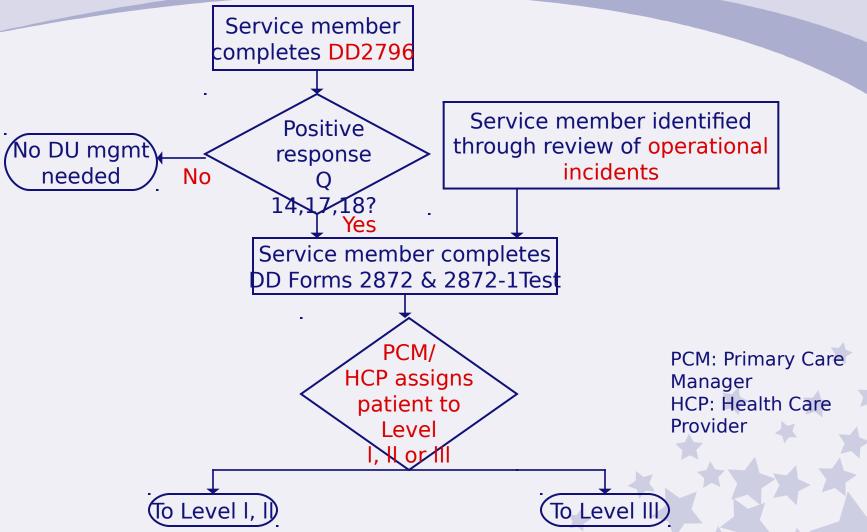
Service-Specific Depleted Uranium (DU) Policies



- Army OTSG/MEDCOM Policy Memo 03-007, Medical Management of Army Personnel Exposed to Depleted Uranium (DU), 13 Jan 04
- ♠ Air Force SG Policy Letter #03-003, Air Force Medical Service Policy on Operation IRAQI FREEDOM Depleted Uranium (DU) Medical Management, 14 Aug 03
- Navy/Marines BUMED Instruction 6470.10B, Initial Management of Irradiated or Radioactively Contaminated Personnel, 26 Sep 03

Algorithm for Identifying Potential DU Exposures





Depleted Uranium (DU) Questionnaire DD Form 2872 Test

- Modification of VA Form 10-9009D
- 3 Parts
 - Demographic data
 - History and classification of DU exposure
 - Urine uranium results
- Will be converted to SF 600 Overprint in the future

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Health Survey DD Form 2872-1 Test

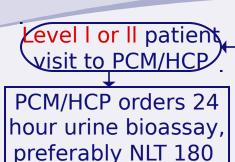


- Short, generic measure of health-related functioning
- Comprised of 36 questions asking the patient to describe physical or emotional problems over the past four weeks
- Contents identical to Short Form (SF) 36
- Will be included on SF 600
 Overprint with DD Form
 2872 Test in the future

	SURVEY				
(Supersedes Sho	ort Form (SF)	- 36)			
PRIVACY AC	T STATEMEN	IT			
AUTHORITY: Sections 1074f, 3013, 6013, 8013, Title 10, U					
RINCIPAL PURPOSE(S): To assess your state of health after nilitary health care providers in identifying and providing prese				ea concern a	na to assist
OUTINE USE(S): To other Federal and State agencies and civ	ilian health co	re providers	as necessary	, in order to	provide
ecessary medical care and treatment. NSCLOSURE: Voluntary; however, if information is not provid	led, health ca	re WILL be fu	rnished, but	comprehensi	ve care may
ot be possible.					
IAME (Lost, Middle, First)	SSN		DAT	Έ	
This survey asks for your views about your health. This in	formation will	help you kee	p track of ho	w you feel a	nd how
vell you are able to do your usual activities. Answer every question by selecting the answer as indicate.	d If you are	ungura about	how to som	wer a questio	o oleane
ive the best answer you can.	a. II you are	district acces	11007 10 01121	ner a questio	ii, piedze
. In general, would you say your health is: (Fill in the circle t	hat best desc	ribes your an	swer.)		
Excellent Very Good Good		Fair	Po	or	
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. Compared to one year ago, how would you rate your health	n in general no	ow?			
Much better Somewhat better About the	e Som	ewhat worse	Much		
now than one now than one same as or year ago year ago year ago		w than one year ago	now th		
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Vigorous Activities, such as running, lifting heavy object strenuous sports	ts, participati	ng in	Yes, limited a lot	Yes, limited a little O	No, not limited at all O
 Moderate Activities, such as moving a table, pushing a bowling, or playing golf 	vacuum clear	ner,	Q	Q	O
c. Lifting or carrying groceries			0	٥	0
d. Climbing several flights of stairs			0	0	0
e. Climbing one flight of stairs			0	O	0
f. Bending, kneeling, or stooping			O	0	O
g. Walking more than a mile			Ф	0	ø
h. Walking several hundred yards			O	0	0
i. Walking one hundred yards			0	o	0
j. Bathing or dressing yourself			0	٥	٥
During the past 4 weeks, how much of the time have you h	had any of the	following pr	oblems with	your work or	other
regular daily activities as a result of your physical health?	All of	Most of	Some of	A little of	None of
	the time	the time	the time	the time	the time
 a. Cut down on the amount of time you spent on work or other activities 	O	O	0	O	0
b. Accomplished less than you would like	٥	O	0	Ó	O
c. Were limited in the kind of work or other activities	0	О	0	0	0
 Had difficulty performing the work or other activities (for example, it took extra effort) 	0	o	0	0	О

Process for Ordering DU Bioassay



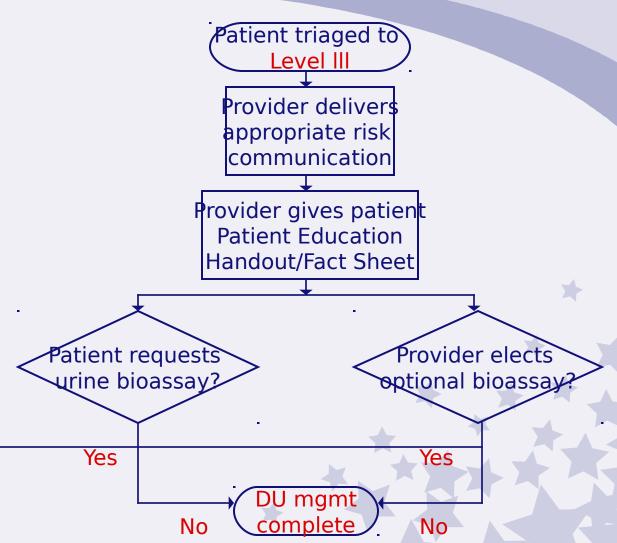


PCM/HCP gives
patient
Patient Education
Handout#Fact Sheet

days post-exposure

PCM/HCP delivers
appropriate risk
communication about
DU bioassay testing

Servicespecific DU processin



Laboratory Testing



24-Hour Urine Samples
Sent to ServiceDesignated Lab

- ♠ Army USACHPPM Lab
- ♠ Air Force AFIOH Lab
- Navy/Marines VA Lab

Urine Creatinine Analysis
Performed at ServiceSpecified Lab

- Army Local MTF Lab (Results sent to USACHPPM with urine specimen)
- Air Force Local MTF Lab
 (Results sent to AFIOH with urine specimen)
- Navy/Marines VA Lab

USACHPPM – US Army Center for Health Promotion and Preventive Med AFIOH – Air Force Institute for Operational Health VA – Baltimore Veterans Affairs Medical Center

Testing Embedded Fragments



- ♣ HA Policy 04-004 states:
 - "Forward any embedded fragments removed from injured personnel to an appropriate laboratory for analysis of the metal composition."
- ◆ Testing is useful for verifying the source of DU exposure and identifying other types of fragments that may pose potential health risks or require medical follow-up

Laboratory Analysis for Uranium and Depleted Uranium



Army

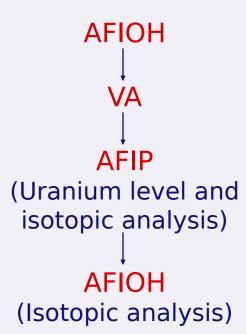
USACHPPM

(Uranium level and isotopic analysis when uranium level is ≥ 268 ng/L)

AFIP

(Isotopic analysis when uranium level is <268ng/L)

Air Force



Navy/Marines

VA

AFIP
(Uranium level and isotopic analysis)

DU Bioassay Results



- Bioassay results and interpretation prepared by
 - Army USACHPPM
 - Air Force AFIOH
 - Navy/Marines Baltimore VA

DU Bioassay Results (cont.)



- Results distributed to
 - Ordering provider/lab
 - Notifies patient of results
 - Ensures results are filed in patients' medical record
 - Navy/Marine patients receive letter with results from VA
 - Service-specific dosimetry center
 - Deployment Health Clinical Center for central archiving

Service Semi-Annual Report Summary OIF DIJ Bioassay Results (as o

OIF DU Bioassay Results (as of 31 Mar DHCC

04)

Exposur e Categor y	Army	Navy/ Marine s	Air Forc e	T O T A L	Elevate d Total Uraniu m	Detect -able DU	Retained Fragment S
Level I	107	32	1	140	4	5	5 (DU)
Level II	107	195	3	305	8	0	0
Level III	52	0	2	54	0	0	5 (non DU)
Uncat	267	0	0	267	2	0	0
Total	533	227	6	766	14	5	5/5

Referral to Baltimore VA DU Follow-Up Program



- ♠ All service members with embedded DU fragments and others with positive urine DU bioassay results will be offered referral to the VA DU Follow-up Program
- ♠ In accordance with ASD Memorandum 9 April 2004, all referrals must be coordinated through the Deployment Health Clinical Center (DHCC)
- Primary care manager or health care provider will contact the DHCC to make arrangements with the VA for the referral
- Referrals submitted on SF 513, Consultation Sheet

DHCC's Role in Implementing (ASD(HA) DU Policy

- ◆ Central archive for all DoD patient information related to DU exposure, testing, and follow-up for active duty and reserve personnel
- Coordination of referral to VA of DU positive patients
- Clinical guidance for implementing DoD DU Policy
 - Clinical consultation
 - Tools and resource material

PDH-CPG Toolbox Reference Cards on Depleted Uranium

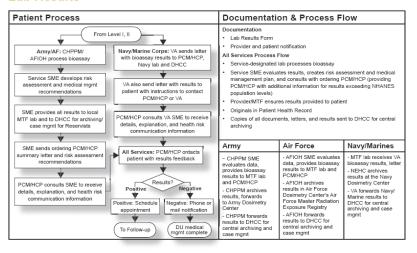


Depleted Uranium

Depleted Uranium Exposure Medical Management Process Flow *DoD Process Summary*

1. Identification: Positive responses on DD Form 2796, Questions 14, 17, or 18; or identification with known exposure event or upit. Annotate DD 2796; send to AMSA.

Depleted Uranium Exposure Medical Management Process Flow *Lab Results*

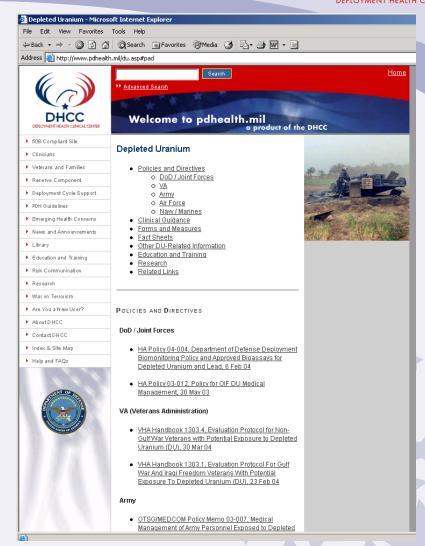




DHCC Depleted Uranium Page www.PDHealth.mil

DEPLOYMENT HEALTH CLINICAL CENTER

- ♠Policies and Directives
- ◆Clinical Guidance
- ◆Forms and Measures
- **♦**Fact Sheets
- **♦**Other DU-Related Information
- ◆Education and Training
- **↑**Research
- ♠Related Links



Depleted Uranium Presentation www.PDHealth.mil

- DHCC Microsoft Internet Explorer _ 🗆 × **Deployment Health Clinical Training Series** Provider Helpline: 1-866-559-1627 January 27-29, 2004 www.PDHealth.mil Operation Iragi Freedom (OIF) **Management of Depleted Uranium** Paused **Exposures** ▶)• **(4)** • **(4)** R. Craig Postlewaite, DVM, MPH Senior Analyst, Force Health Protection, DoD FHP&R Hello, I am Dr Craig Postlewaite, Senior Deployment Health Support Directorate Environmental Health Analyst for the Department of Defense Deployment Health Support Directorate. I am here to speak with you about the assessment and medical management of depleted uranium exposures acquired during Operation Iraqi Freedom Dr. R. Craig Postlewaite and in support of the Post-Deployment Clinical 2 - Objectives Practice Guideline. I will cover the following topics 3 - Background during this presentation: 4 - Military Uses of DU 5 - DU External Exposures
- ♦Video
- **♦**Script
- **♦**Slides